

PART B—ISSUE FEE TRANSMITTAL

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1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
JAMES W MILLER SUITE 1005 FOSHAY TOWER 821 MARQUETTE AVE MINNEAPOLIS MN 55402		INVENTOR'S NAME	
		Street Address	
		City, State and Zip Code	
		CO-INVENTOR'S NAME	
		Street Address	
		City, State and Zip Code	
		<input type="checkbox"/> Check if additional changes are enclosed	

APPLICATION NO.	FLING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/677,296	07/09/96	016	MELIUS, T	3501 07/31/97
First Named Applicant	SALLSTROM, STEVE A.			

TITLE OF INVENTION ALL WHEEL HYDRAULIC DRIVE SYSTEM

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3	26.2.965/B/U	056-007.000	P86	UTILITY	NO	\$1290.00 10/31/97

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	1 <u>JAMES W. MILLER</u>
	2 _____
	3 _____

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE <u>THE TORO COMPANY</u>	6a. The following fees are enclosed: <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____
(2) ADDRESS: (CITY & STATE OR COUNTRY) <u>MINNEAPOLIS, MINNESOTA</u>	6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER <u>10-1315</u> (ENCLOSE A COPY OF THIS FORM) <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advance Order - # of Copies <u>10</u> <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees
A. <input type="checkbox"/> This application is NOT assigned. <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS. PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.	The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Authorized Signature) <u>James W. Miller</u> (Date) <u>10/31/97</u> NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Certificate of Mailing

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

on: OCTOBER 31, 1997 (Date)
JAMES W. MILLER (Name of person making deposit)
James W. Miller (Signature)
10/31/97 (Date)

1. TRANSMIT THIS FORM WITH FEE